020	1 P. P. P		Q E Q .
0.0. F 10	Please type a plus sign (+) inside this l	box → +  Attorney Docket No.	PTO/SB/05 (08-00)  H680129.0001US0
		Allorney Docker No.	H680129.0001US0
	PATENT APPLICATION	First Named Inventor	<u> </u>
	TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	or Application identifier	Scott Douglas Wood
	ADDRESS TO: Commissioner for Patents	Title	GASTRIC ASPIRATE INTESTINAL FEEDING TUBE
	Mail Stop Patent Application PO Box 1450 Alexandria, VA 22313-1450	Express Mail No.	EV 330688961 US

Alexan	dna, VA 22313-1450	l							
See MPEP	ATION ELEMENTS chapter 600 concerning utility pater Fee Transmittal Form PTO/SB/1			CD-ROM or CD-R Computer Program	in duplicate, large table or (Appendix)				
2. X	Applicant claims small entity st			ACCOMPANYING APPLICATION PARTS					
4. X 1	Drawing(s) (35 USC 113) [7	Total Pages: 10]  Total Pages: 2]	10	Assignment Papers	(cover sheet & document(s	s))			
a. <u>X</u> 1	Newly executed (original or cop Copy from a prior application (3)	oy)	11	37 CFR 3.73(b) Star	tement (when there is an a	ssignee)			
	for continuation/divisional with No. [Note No. 6 below]		12. <u>X</u>	Power of Attorney					
i	i DELETION OF INVI	eleting inventor(s) name		English Translation	Document (if applicable)				
	the prior application, see 37 Incorporation By Reference (use		14. <u>X</u>	Information Disclos Statement (IDS)/PT					
•	<i>checked)</i> The entire disclosure of the prior applica the oath or declaration is supplied under		of	O Copies of IDS Citations  Preliminary Amendment					
l 1	being part of the disclosure of the accom hereby incorporated by reference therein	panying application and i	13						
	Nucleotide and/or Amino Acid (if applicable, all necessary)	•	on 16. <u>X</u>	Return Receipt Postcard (Itemized)					
b	Computer Readable Copy (CRF Specification Sequence Listing i CD-ROM or CD-R (2	on:	17	Certified Copy of Professional Copy of Profession Copy of Profession Priority is continuous and priority an	riority Document(s)				
c s	paper Statement verifying identity of a	above copies	18	Other:					
19. If a	a CONTINUING APPLICATION,  Continuation			requisite information:					
_	Divisional	_		plication Information:					
_	Continuation-in-part (CIP)	Exa	aminer	ner Group Art Unit:					
20. Corres	pondence Address								
	mer Number or Bar Code Label	or 01200 sert Customer No. o	x Attach bar cod		espondence address below				
Name	Attn: Richard A. Schafer AKIN GUMP STRAUSS H	_		e label here)					
Address	711 Louisiana Street, 1900								
City	Houston		Texas	Zip Coa	de 77002	-			
Country	U.S.A.		(713) 220-5800	Fax	(713) 236-0822				
Data	2/4/2004		M	when A/	Shal				

Richard A. Schafer, Reg. No. 45,078

Total Amount of Payment

## FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision

\$ 430.00

Complete if Known				
Application Number	Unknown			
Filing Date	February 4, 2004			
First Named Inventor	Scott Douglas Wood			
Examiner Name	Unknown			
Group / Art Unit	Unknown			
Attorney Docket No.	H680129.0001US0			

METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)						
1. X The Commissioner is hereby authorized to charge				□ 3. A	3. Additional Fees						
	indicated fees and credit any overpayments to:				1						
Deposit Account No.: 16-2435				Large	Large	Small	Small				
Deposit Account No 16-2433  Deposit Account Name:				Fee	Entity	Fee	Entity	Fee Description	Fee Paid		
ŀ	Deposit Account Name: Akin Gump Strauss Hauer & Feld, LLP					Code: 1051	\$ 130	Code :: 2051	\$ 65	Surcharge - late fee or oath	\$
3,7						1052	\$ 50	2052	\$ 25	Surcharge - late provisional	\$
_ <u>X</u> _	X Charge any additional Fee Required Under 37 CFR §§ 1.16 & 1.17					- 11			-	filing fee or cover sheet	
						1812	\$2,520	1812	\$2,520	Request for Reexamination Requesting publication of	\$
X				entity status.		1804	\$920*	1804	\$920*	SIR prior to Examiner action	\$
		7 CFR				1805	\$1840*	1805	\$1840*	Requesting publication of	\$
2. <u>X</u>	_ Payn	nent En	closed:	X Check		1				SIR after Examiner action Extension for reply within	
				Money C	)rder	1251	\$ 110	2251	\$ 55	first month	\$
				Credit Ca	ard	1252	\$ 420	2252	\$ 210	Extension for reply within	\$
ł				Other		- 11				second month Extension for reply within	
			FEE CAL	CULATION		1253	\$ 950	2253	\$ 475	third month	\$
1 Da	sic Filin		TEE CITE	COLITION		1254	\$1,480	2254	\$ 740	Extension for reply within	\$
Large	Large	Small	Small							fourth month Extension for reply within	
Fee	Entity	Fee	Entity	Fee		1255	\$2,010	2255	\$1,050	fifth month	\$
Code	Fee (\$)		Fee (\$)	Description	Fee Paid	1401	\$ 330	2401	\$ 165	Notice of Appeal	\$
1001	\$770	2001	\$385	Utility Filing Fee	\$ 385.00	1402	\$ 330	2402	\$ 165	Filing a brief in support of an appeal	\$
1002	\$340 \$530	2002	\$170 \$265	Design Filing Fee Plant Filing Fee	\$   \$	1403	\$ 290	2403	\$ 145	Request for oral hearing	\$
1003	\$770	2004	\$385	Reissue Filing Fee	s	1452	\$ 110	2452	\$ 55	Petition to revive -	\$
1005	\$160	2005	\$ 80	Provisional Filing Fee	\$					unavoidable Petition to revive -	
				Subtotal (1)	\$385.00	1453	\$1,330	2453	\$ 665	unintentional	\$
2. Ext	tra Clai	m Fee	s			1501	\$1,330	2501	\$ 665	Utility issue fee (or reissue)	\$
				Fee		1502 1503	\$ 480 \$ 640	2502 2503	\$ 240 \$ 320	Design issue fee Plant issue fee	\$ \$
Claims			Extr	a (below)	Fee Paid	1460	\$ 130	1460	\$ 130	Petitions to the	\$
Total		-20** =	5	x \$9 =	\$ 45		\$ 150	1400	\$ 150	Commissioner	J.
Indep.		. 3** =		x \$ =	\$ 0	1807	\$ 50	1807	\$ 50	Petitions related to provisional applications	\$
Multiple	Depende			::1:6	\$	1806	\$ 180	1806	\$ 180	Submission of Information	\$
For Dai	ssues, see		number prev	iously paid, if greater	•	1000	\$ 100	1000	<b>J</b> 100	Disclosure Statement	J
700000000000000000000000000000000000000		Small	in mentering			8021	\$ 40	8021	\$ 40	Recording each patent assignment per property	\$
Large E	nuty	tity Fee		Fee						(times number of properties)	
Fee (		(\$)				1809	\$ 770	2809	\$ 385	Filing a submission after	•
\$ 18	\$		Claims in excess of 20			1809	\$ //0	2809	\$ 383	final rejection (37 CFR 1.129(a))	\$
\$ 86		43	Independent claims in excess of 3			1801	\$ 770	2801	\$ 385	Request for Continued	\$
\$ 290		145	Multiple dependent claim, if not paid			<b>—</b>    '``'		-50.	<b>4</b> 303	Examination (RCE)	<b>~</b>
\$ 86	**Reissue independent claims over original patent **Reissue claims in excess of 20 and over original			1802	\$ 900	1802	\$ 900	Request for expedited examination of a design	\$		
\$ 18	\$ 18								application	-	
	Subtotal (2) \$45					O'be-	faa (ennaif	۸۰			e
L			Subtotal	(4)		Uner :	fee (specify	·)·		<del></del>	\$
						fee (specify				\$	
					* Redi	aced by Bas	ic Filing	Fee Paid			
						ll l				Subtotal (3)	\$ 0

Date: 2/4/2004

Richard A. Schafer, Reg. No. 45,078

Submitted by

Express Mail No. EV 330688961 US